



Hanover, Massachusetts 02339-2242 www.hanover-ma.gov

Fax: 781-826-5239

REQUEST FOR CERTIFIED LIST OF ABUTTERS

Please allow for a 10 day turn around and plan accordingly.

REQUIRED BY	DEPARTMENT	Т:		
z	BA 300 FT	PLANNING 30	0 FT C	ONSERVATION 100 FT
BC	OARD OF SELE	CTMENLICE	NSING 500 FT	DPW
REQUESTED B	Y	(Please print legi	ihly)	
TELEBLIONE.				
TELEPHONE:		EN	1aII:	
FAX: _				
DATE REQUIR	ED BY			
LOCATION:	MAP	LO)T	
PARCEL LOCA	TION :			
OWNER OF				
PURPOSE OF I		LIQUOR LICENSE, CLAS	 SS II AUTO, JUI	NK DEALER
		•	·	
SIGNED				
DATE				